



City of Cambridge
Inspectional Services Department
831 Massachusetts Avenue
Cambridge, Massachusetts 02139
(617) 349-6100
Fax (617) 349-6132
TTY (617) 349-6112

**APPLICATION FORM FOR A BUILDING PERMIT TO PERFORM MINOR ALTERATIONS,
REPAIRS, ROOFING, OR SIDING**

Permit No:

Fee:

Current Use:

The undersigned hereby applies to the Commissioner of Inspectional Services for a permit in accordance with, Section 110 of the 6th Edition, Mass State Building Code.

Building Address:

Date:

Zone:

Owner:

Phone:

Contractor:

Phone:

Address:

City:

Zoning Information: Will the proposed work result in any changes in the exterior dimensions, height, or gross floor area? Will there be any changes in the current use as a result of this construction?

Has the structure been vacant/not used in excess of two years? Yes No. If yes to any of these questions, explain in detail below.

Type of work: repair, alteration, addition, siding* **Cost Estimate: \$**

Description of Work: Clearly indicate the scope of work under this permit.

Type of Roofing

Material of existing roof:

Number of Layers:

Type of Siding:

***Electrical permit required before a siding permit can be issued.**

WORKERS' COMPENSATION INSURANCE AFFIDAVIT (M.G.L.c 152 S 25C(6))

Workers' Compensation insurance affidavit must be completed and submitted with this application. Failure to provide this affidavit will result in the denial of the issuance of the building permit,

Signed affidavit attached: yes no.

HOLD HARMLESS CLAUSE: The Permittee(s) by acceptance of this permit agree(s) to indemnify and hold harmless the City of Cambridge, and its employees, from and against any and all claims, demands and actions for damages resulting from operations under this permit regardless of negligence of the City of Cambridge, and its employees, against all claims, demands and actions.

**BUILDING PERMIT APPLICATION TO PREFORM MINOR ALTERATIONS, REPAIRS,
ROOFING AND SIDING**

Permit No. _____

READ BEFORE SIGNING:

The undersigned hereby certifies that he/she has read and examined this application and that the proposed work subject to the provisions of the Massachusetts State Building Code and other applicable laws and ordinances is accurately represented in the statements made in this application and that the work shall be carried out in accordance with the foregoing statements and in compliance with the provisions of law and ordinance in force in the date of this application to the best of his/her ability.

Signature of Licensed Builder

Printed or Typed Name

Phone

(License #) (Expiration Date)

City: Class:

State: Class:

Signature of owner/auth. Rep.

Printed or Typed Name

APPROVALS:

Historical: _____

Other: _____

Electrical: _____

Plumbing: _____

Access: _____

Zoning Approval: _____

Permit Granted By: _____

Date: _____

Plans: _____

Inspections: _____

Final: _____

Remarks:
